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APPLICATION NUMBER

FILING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

09/816,839

03/23/2001

Michael Fung

TNX00-04 US

CONFIRMATION NO. 6910

26839 TANOX, INC.

10301 STELLA LINK

HOUSTON, TX 77025

FORMALITIES LETTER

OC000000006043440

06/05/2001 BSAYASI1 00000036 09816839

01 FC:202 02 FC:203 03 FC:205

40.00 BP 99.00 OP ~ 65.00 OP

Date Mailed: 05/04/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

1075547195 01/6/0:204

THRESONT 00000008 200087 27.00 CH

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100.09 DP

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- Total additional claim fee(s) for this application is \$184.
 - \$9 for 18 total claims over 20.
 - \$40 for 4 independent claims over 3.
 - \$135 for multiple dependent claim surcharge.
- · The oath or declaration is missing. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 249.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

A copy of this notice <u>MUST</u> be returned with the reply.

Customer Service Center

Initial Patent Examination Division (703) 308-1202
PART 2 - COPY TO BE RETURNED WITH RESPONSE





PATENT

ATTORNEY DOCKET NO.: TNX00-04

Customer No.: 26839

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of: Michael FUNG et al.))
Serial No.: 09/816,839))) Group Art Unit: 1645
Filed: March 23, 2001)) Examiner: TO BE ASSIGNED
For: ANTI-C2/C2a INHIBITORS OF COMPLEMENT ACTIVATION)))
Assistant Commissioner for Patents Washington, D.C. 20231	
Dear Sir:	

RESPONSE TO NOTICE TO FILE MISSING PARTS

Applicants hereby submit the executed declaration for the above-referenced application along with the required declaration surcharge of \$65.00.

Applicants submit that the additional claim fees assessed are incorrect. The correct amount of additional claim fees is:

18 claims over 20 X 9 = \$162.00 + 4 independent claims over 3 x 40 = \$160.00 + \$135.00 multiple dependent fee = \$457.00.

Applicants already paid \$291.00 in additional claim fees (\$135.00 multiple dependent claim fee and \$156.00 in excess claim fees).

Of the \$166.00 still owed, Applicants include \$139.00 in the attached check for claim fees. Please charge our deposit account # 20-0087 the additional fee of \$27.00 and any additional amounts necessary to comply with the Notice to File Missing Parts.

Applicants request notification if there is a discrepancy requiring additional fees.





requirements.

Respectfully Submitted,

Dated: June 1, 2001.

Cheny A Liliestrano

Reg. No. 45,275

JUN 0 1 2001

Signature

06-04-01



Please type a plus sign (+) inside this box -

PTO/SB/21 (08-00)

1615	• =	Approved for use through 10/0 // 2002. Office
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Application Number 09/816,839 TRANSMITTAL **Filing Date** March 23, 2001 **FORM** Micheal FUNG et al. First Named Inventor 1645 (to be used for all correspondence after initial filing) Group Art Unit To Be Assigned **Examiner Name** TNX00-04 Attorney Docket Number Total Number of Pages in This Submission 50 **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers (for an Application) Fee Transmittal Form to Group X Appeal Communication to Board Drawing(s) X Fee Attached of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition Proprietary Information After Final Petition to Convert to a Provisional Application Affidavits/declaration(s) Status Letter Power of Attorney, Revocation Change of Correspondence Address Other Enclosure(s) (please identify below): Extension of Time Request **Terminal Disclaimer** Express Abandonment Request Request for Refund Information Disclosure Statement CD, Number of CD(s). Certified Copy of Priority Remarks Document(s) Response to Missing Parts/ Incomplete Application 39 References included with the Information Response to Missing Parts Disclosure Statement under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Cheryl A. Liljestrand Individual name Signature June 1, 2001 Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Typed or printed name

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	504.	00
(2)	JUT .	v

Complete if Known		
Application Number	09/816,839	
Filing Date	March 23, 2001	
First Named Inventor	Michael Fung	
Examiner Name	To Be Assigned	
Group Art Unit	1645	
Attorney Docket No.	TNX 00-04	

METHOD OF PAYMENT	FEE CALCULATION (continued)	
The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES	
indicated fees and credit any overpayments to: Deposit	Large Small	
Account Number 20-0087	Entity Entity Fee Fee Fee Fee Fee Description	Fee Paid
Deposit	Code (\$) Code (\$)	
Account Name Tanox, Inc.	105 130 205 65 Surcharge - late filing fee or oath	65.00
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	
Applicant claims small entity status.	139 130 139 130 Non-English specification	
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination	
2. Payment Enclosed: Check Credit card Money Order Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action	
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month	
Large Entity Small Entity	116 390 216 195 Extension for reply within second month	
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month	
Code (\$) Code (\$) Fee Paid 101 710 201 355 Utility filing fee	118 1,390 218 695 Extension for reply within fourth month	
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month	
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal	
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal	
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing	
	138 1,510 138 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable	
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional	
Fee from Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)	
Total Claims20** = X 9 =	143 440 243 220 Design issue fee	
Independent Claims - 3** = 1 x 40 = 40	144 600 244 300 Plant issue fee	
Multiple Dependent	122 130 122 130 Petitions to the Commissioner	
Lana Fatta a manus	123 50 123 50 Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt	180.00
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)	120:00
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)	
and over original patent	169 900 169 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 139 .00	Other fee (specify)	
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 30	55.00

SUBMITTED BY	SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Cheryl A. Liliestrand	Registration No. (Attorney/Agent)	45,275	Telephone	713-578-4182
Signature	Therul Lilestrain	id		Date	5/31/01

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